

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

MTA Police Benevolent Association

ADDRESS (number and street)

181 South Franklin Ave

☐Check if different
than previously
reported. (ACC)

Valley Stream

NY

11581

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00366922

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☒October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2006

through

09

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Raymond Gimmler

Signature of Treasurer

Electronically Filed by Raymond Gimmler

Date

10

16

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
MTA Police Benevolent Association

Report Covering the Period:

From:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 6 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 9 | 3 | 0 | 2 | 0 | 0 | 6 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 2006 | | 15930.00 |
| (b) Cash on Hand at Beginning of Reporting Period | 1080.00 | |
| (c) Total Receipts (from Line 19) | 9625.00 | 9625.00 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 10705.00 | 25555.00 |
| 7. Total Disbursements (from Line 31) | 8225.00 | 23075.00 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 2480.00 | 2480.00 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

MTA Police Benevolent Association

Report Covering the Period:

From:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 7 | 0 | 1 | 2 | 0 | 0 | 6 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 9 | 3 | 0 | 2 | 0 | 0 | 6 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (i) Itemized (use Schedule A) | | |
| (ii) Unitemized | 9625.00 | 9625.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) ➤ | 9625.00 | 9625.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤ | 9625.00 | 9625.00 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 9625.00 | 9625.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 9625.00 | 9625.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | 0.00 | 0.00 |
| (i) Federal Share..... | | | |
| (ii) Non-Federal Share..... | | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | | 0.00 | 0.00 |
| 27. Loans Made..... | | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | | |
| (a) Individuals/Persons Other Than Political Committees | | 0.00 | 0.00 |
| (b) Political Party Committees | | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | | 0.00 | 0.00 |
| 29. Other Disbursements..... | | 8225.00 | 23075.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | | |
| (i) Federal Share | | 0.00 | 0.00 |
| (ii) "Levin" Share | | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | | 8225.00 | 23075.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | | 8225.00 | 23075.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 9625.00 | 9625.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 9625.00 | 9625.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 11

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

MTA Police Benevolent Association

Full Name (Last, First, Middle Initial)

A. Abbate for Assembly

Mailing Address PO Box 280235

City
Brooklyn

State
NY

Zip Code
11228

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4162

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Democratic Assemnly Campaign Committee

Mailing Address 107 Washington Ave

City
Albany

State
NY

Zip Code
12210

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4156

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends for Fuschillo

Mailing Address PO Box 336

City
Merrick

State
NY

Zip Code
11566

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4152

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 11

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

MTA Police Benevolent Association

Full Name (Last, First, Middle Initial)

A. Friends of Dean Skelos

Mailing Address 31 Roxen Road

City State Zip Code
Rockville Center NY 11570

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4140

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of Jim Conte

Mailing Address 58 Hillwood Drive

City State Zip Code
Huntington NY 11746

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4166

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Friends of Mike Spano

Mailing Address PO Box 221

City State Zip Code
Yonkers NY 10710

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4150

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 11

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

MTA Police Benevolent Association

Full Name (Last, First, Middle Initial)

A. Friends of Phil Boyle

Mailing Address 30 Tower Place

City
Smithtown

State
NY

Zip Code
11787

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4142

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Friends of Robert Barra

Mailing Address 22 Babcock Place

City
Lynbrook

State
NY

Zip Code
11563

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4146

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Friends of Serphin Maitese

Mailing Address PO Box 38

City
Middle Village

State
NY

Zip Code
11379

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4144

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MTA Police Benevolent Association

Full Name (Last, First, Middle Initial)

A. Friends of Steve Englebright

Mailing Address PO Box 2703

City
Setauket

State
NY

Zip Code
11733

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4148

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. Friends of Tom Alfano

Mailing Address 400 Garden City Place

City
Garden City

State
NY

Zip Code
11530

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4168

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

C. Friends of Tom DiNapoli

Mailing Address PO Box 252

City
Great Neck

State
NY

Zip Code
11022

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4160

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MTA Police Benevolent Association

Full Name (Last, First, Middle Initial)

A. NY State Sen. Republican Committee

Mailing Address PO Box 7229

City Albany State NY Zip Code 12224

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4154

Date of Disbursement

M M / D D / Y Y Y Y
0 8 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Spitzer 2006

Mailing Address 330 Madison Ave

City New York State NY Zip Code 10017

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4164

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 8 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Town of Islip Republican Committee

Mailing Address 39 Third Ave

City Bayshore State NY Zip Code 11706

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4158

Date of Disbursement

M M / D D / Y Y Y Y
0 8 / 0 8 / 2 0 0 6

Amount of Each Disbursement this Period

125.00

SUBTOTAL of Disbursements This Page (optional)

2125.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

MTA Police Benevolent Association

Full Name (Last, First, Middle Initial)

A. Zebroski For Rockland

Mailing Address 20 Fay Road

City
New City

State
NY

Zip Code
10956

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.4170

Date of Disbursement

/ /

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

8225.00